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Congresswoman Johnson, thank you for the opportunity to testify today. My message is simple – enough is enough. The cuts in the Medicaid system that are contained in the House version of the Fiscal Year 2006 Budget resolution are Draconian and will have an extremely harmful and long-lasting impact on Parkland Health & Hospital System.

To add insult to injury, they come after the 1997 Balanced Budget Act which cost Parkland \$80 million and cuts in the state Medicaid and CHIP system in 2003 which cost Parkland an additional \$47 million. As a result of those cuts, my system embarked on a cost-cutting plan that eliminated \$225 million from our budget over three years. This not only included the elimination of several hundred jobs, but also the reduction in vital services that our vulnerable patients depend on.

The facts are simple. Parkland is the safety-net institution that was established to care for Dallas County residents. As a tax-supported institution, we often treat the sickest and the poorest of our county. However, we are at capacity. The inn is full, and as a result surgeries are being delayed, sometimes for months. Wait times to see physicians or have prescriptions filled are exorbitant. For example, if you need to have a hernia repaired, you will wait, on average, 3 months. Of course, if it becomes an emergent situation, you will be treated immediately. However, as a practicing physician, I can assure that treatment while a problem is still routine is always preferred. The patient has a much quicker recovery and the cost for treating the patient is significantly lower.

In 2001, Parkland treated 58.2 percent of the adult self-pay inpatient discharges in Dallas County. By comparison, in 2003, we only treated 45.4 percent of this same population. In 2001, we did approximately \$350 million in uncompensated care. In 2003, this number had risen to \$425 million. While the numbers of patient have dropped, the cost associated with caring for those patients continues to rise. Concurrently, our sister hospitals are seeing their volumes of self-pay patients increase. Clearly, this trend cannot be sustained. When safety-net hospitals such as Parkland suffer, all hospitals suffer. This is a community problem. Indeed, a national problem.

The Senate wisely chose to adopt an amendment that eliminated the cuts in the Medicaid system. However, the House version included over \$20 million in cuts. That is \$20 million that will be shifted to local taxpayers to absorb. The entire issue of taxpayer equity is one that must be addressed. We cannot continue to shift federal responsibilities to the backs of the working class at the local level.

I implore to put a stop to this practice. Reform the Medicaid system with thoughtful and meaningful changes. Reforming based solely on budget restraints is unconscionable.